## Complete Summary

### TITLE

Depression: percent of patients with a diagnosis of depression reporting an improvement in function.

### SOURCE(S)

HDC topics: depression. [internet]. Rockville (MD): HRSA Health Disparities Collaboratives; 2005[cited 2005 Mar 31]. [9 p].

## Measure Domain

### PRIMARY MEASURE DOMAIN

Outcome

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This population-based measure is used in primary care settings to assess the percent of patients with a diagnosis of depression reporting an improvement in function as measured by item 10 of the Patient Health Questionnaire (PHQ).

This measure assesses functional improvement in patients treated for depression. While some studies have not found large effects on improving function, some have (Rost K et al. BMJ 2002).

Note: The universe of patients (denominator) for this measure is limited to the last 12 months, This enables monitoring of changes in performance in the last 12 calendar months on a continuing basis.

### RATIONALE

Depression is one of the most common chronic illnesses in the United States, with a one-year prevalence rate of 5-6 percent. Depression is twice as common in women as in men; it is estimated that 20 percent of women and 10 percent of men will have an episode of major depression at some point in their lives. Depression often takes a severe toll on the physical and social functioning of those who suffer from it. According to one study using the SF-36 quality-of-life measure, depression impaired social functioning more than any other chronic illness, including arthritis, diabetes, congestive heart failure (CHF), angina, and hypertension; and impaired physical functioning more than any other chronic condition except the cardiac illnesses.

Depression care in the United States is even more fragmented than care of other chronic illnesses, creating a major gap between the recommended guidelines for care and actual care. It is estimated that only 19 percent--fewer than 1 in 5--of people with depression who see their primary care provider receive appropriate, guideline-based care.

Improving depression care is not only a matter of meeting the typical challenges of providing good chronic illness care--following people over time rather than responding to acute episodes, providing systematic follow-up to ensure that patients adhere to treatment plans, and so on. In addition, depression care brings its own complex set of challenges, ranging from underdiagnosis to financial disincentives for providers to special treatment requirements because the underlying nature of the illness frequently undercuts patients' ability to be effective managers of their own care.

This measure is one of 8 additional recommended measures in the HRSA Health Disparities Collaborative for Depression; participants choose to track at least one of these measures. Participants also track 5 measures for the Depression Collaborative.

PRIMARY CLINICAL COMPONENT

Depression; functional improvement

DENOMINATOR DESCRIPTION

All patients with a diagnosis of depression who have a score of greater than 0 on their last New Episode Function, which must be within the last 12 calendar months

NUMERATOR DESCRIPTION

All patients with a diagnosis of depression who on their last New Episode Function had a score greater than 0 and whose last Current Function have a reduced score as measured by item 10 of the Patient Health Questionnaire (PHQ) (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

## Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

## Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

## State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Collaborative inter-organizational quality improvement
Internal quality improvement

## Application of Measure in its Current Use

CARE SETTING

Ambulatory Care
Behavioral Health Care
Community Health Care

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians
Psychologists/Non-physician Behavioral Health Clinicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

## Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

See "Rationale" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

See "Rationale" field.

BURDEN OF ILLNESS

See "Rationale" field.

UTILIZATION

Unspecified

COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better
Living with Illness

IOM DOMAIN

Effectiveness
Equity
Patient-centeredness

## Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients with a diagnosis of depression who have a score of greater than 0 on
their last New Episode Function, which must be within the last 12 calendar months

## DENOMINATOR SAMPLING FRAME

Patients associated with provider

## DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions
All patients with a diagnosis of depression who have a score of greater than 0 on their last New Episode Function, which must be within the last 12 calendar months

Exclusions
Unspecified

## RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

## DENOMINATOR (INDEX) EVENT

Clinical Condition
Diagnostic Evaluation

## DENOMINATOR TIME WINDOW

Time window precedes index event

## NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions
All patients with a diagnosis of depression who on their last New Episode Function had a score greater than 0 and whose last Current Function have a reduced score. (Date of Current Function must be later than the date of the last New Episode Function). This could be anywhere from a 1 to 3 point drop on the function question (#10 on the Patient Health Questionnaire [PHQ]). (Note that only patients with a New Episode Function within the last 12 months will be included in this measure.)

Exclusions
Unspecified

## MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

## NUMERATOR TIME WINDOW

Fixed time period

## DATA SOURCE

Special or unique data

## LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

## OUTCOME TYPE

Functional Status

## PRE-EXISTING INSTRUMENT USED

Unspecified

## Computation of the Measure

### SCORING

Rate

### INTERPRETATION OF SCORE

Better quality is associated with a higher score

### ALLOWANCE FOR PATIENT FACTORS

Unspecified

### STANDARD OF COMPARISON

Internal time comparison
Prescriptive standard

### PRESCRIPTIVE STANDARD

Greater than 40%

### EVIDENCE FOR PRESCRIPTIVE STANDARD

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Collaboratives; 2005[cited 2005 Mar 31]. [9 p].

## Evaluation of Measure Properties

### EXTENT OF MEASURE TESTING

Unspecified

ORIGINAL TITLE

Depressed patients who improve in function.

MEASURE COLLECTION

HRSA Health Disparities Collaboratives Measures

MEASURE SET NAME

HRSA HDC Depression Collaborative Measures

SUBMITTER

Health Resources and Services Administration

DEVELOPER

HRSA Health Disparities Collaboratives: Depression Collaborative

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2002 Jan

REVISION DATE

2005 Jan

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

HDC topics: depression. [internet]. Rockville (MD): HRSA Health Disparities
Collaboratives; 2005[cited 2005 Mar 31]. [9 p].

MEASURE AVAILABILITY

The individual measure "Depressed patients who improve in function," is available
from the Health Disparities Collaboratives Web site.

COMPANION DOCUMENTS

The following is available:

- Institute for Healthcare Improvement. Health Disparities Collaboratives changing practice, changing lives: depression training manual. Cambridge (MA): Institute for Healthcare Improvement; 2002. 89 p. This document is available in Portable Document Format (PDF) from the Health Disparities Collaboratives Web site.

NQMC STATUS

This NQMC summary was completed by ECRI July 27, 2005. The information was verified by the measure developer on May 22, 2006.

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